Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW MEXICO	-	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	Part 1: Identify Yourself						
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Caryssa First name V. Middle name	Jeremy First name J. Middle name				
	Bring your picture identification to your meeting with the trustee.	O'Leary Last name and Suffix (Sr., Jr., II, III)	O'Leary Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years	Caryssa V. Becerra					
	Include your married or maiden names.	· · · · · · · · · · · · · · · · · · ·					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4933	xxx-xx-1709				

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and		■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)			
	doing business as names	EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		9 Unger Rd				
		Cedar Crest, NM 87008 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
			Trainson, enest, only, enails a 211 code			
		Bernalillo County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	otor 1 Caryssa V. O'Lear Jeremy J. O'Leary				_	Case number (if known)
Par	t 2: Tell the Court About	Your Banl	cruptcy C	ase		
7.	The chapter of the Bankruptcy Code you are	Check or (Form 20		brief description of each, see <i>l</i> , go to the top of page 1 and c		d by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy priate box.
	choosing to file under	■ Chap	ter 7			
		☐ Chap	ter 11			
		☐ Chap	ter 12			
		☐ Chap	oter 13			
8.	How you will pay the fee	ab ord	out how yo	ou may pay. Typically, if you a rattorney is submitting your pa	re paying the fe	check with the clerk's office in your local court for more details ee yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with
						option, sign and attach the Application for Individuals to Pay
		□ Ire	equest that t is not red	quired to, waive your fee, and r	y request this o	option only if you are filing for Chapter 7. By law, a judge may, if your income is less than 150% of the official poverty line that
						fee in installments). If you choose this option, you must fill out (Official Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.				
			District		When	Case number
			District		_ When	Case number
			District		_ When	Case number
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		_ When	Case number, if known
11.	Do you rent your residence?	□ No.	Go to	line 12.		
	residence?	Yes.	Has yo	our landlord obtained an evicti	on judgment ag	gainst you?
				No. Go to line 12.		
				Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	About an Evict	tion Judgment Against You (Form 101A) and file it with this
		_				

	tor 1 Caryssa V. O'Lear tor 2 Jeremy J. O'Leary			Case number (if known)
Part	Report About Any Bu	sinesses	You Own as a Sol	e Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and locat	ion of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of busine	ss, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street,	City, State & ZIP Code
	it to this petition.			opriate box to describe your business:
			_	Care Business (as defined in 11 U.S.C. § 101(27A))
			_	sset Real Estate (as defined in 11 U.S.C. § 101(51B))
			_	oker (as defined in 11 U.S.C. § 101(53A))
			_	dity Broker (as defined in 11 U.S.C. § 101(6))
			☐ None of	the above
13.	3. Are you filing under Chapter 11, the court must know whether you are a small business debtor so that it can set deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the you a small business in 11 U.S.C. 1116(1)(B).			t you are a small business debtor, you must attach your most recent balance sheet, statement of
	debtor? For a definition of small	■ No.	I am not filing u	nder Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Code.	Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under	Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Pari	t 4: Report if You Own or	Have Any	/ Hazardous Prope	rty or Any Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard	j?
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attentioneeded, why is it r	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the prope	·
	-			Number, Street, City, State & Zip Code

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1	•			Case num	ber (if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes						
	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			■ Yes. Go to line 17.						
		16b.	Are your debts primarily busi money for a business or investr						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe	that are not consu	mer debts or busin	ess debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	are paid that funds will be availa			operty is excluded and administrative expenses rs?			
	administrative expenses are paid that funds will		■ No						
	be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		1 ,000-5,000)	□ 25,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,00		<u> </u>			
		□ 100-1 □ 200-9		□ 10,001-25,0	000	☐ More than100,000			
19.	How much do you	\$ 0 - \$	50.000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000		1 - \$50 million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million			1 - \$100 million 01 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million		01 - \$500 million	☐ More than \$50 billion			
Por	Sign Polow		••••						
Par For	you	I have ev	amined this potition, and I declar	to under penalty of	porium that the infe	ormation provided is true and correct.			
. 01	you		,		. , ,	·			
						le, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.			
do		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
			cy case can result in fines up to S			y or property by fraud in connection with a 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		/s/ Cary	ssa V. O'Leary		/s/ Jeremy J. O				
			a V. O'Leary e of Debtor 1		Jeremy J. O'Lo Signature of Deb				
		Executed	March 31, 2018 MM / DD / YYYY		Executed on M	M/DD/YYYY			

Debtor 1	Caryssa V. O'Leary	
Debtor 2	Jeremy J. O'Leary	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Erenio	Gutierrez Jr.,	Date	March 31, 2018
Signature of	Attorney for Debtor		MM / DD / YYYY
Erenio Gu	tierrez Jr., 1042 Attorney at	Law P.C.	
Printed name			
Erenio Gu Firm name	tierrez Jr., Attorney at Law,	P.C.	
POB 3527	8		
Albuquero	jue, NM 87176-5278		
Number, Street,	City, State & ZIP Code		
Contact phone	505-345-9394	Email address	bankruptcyabq@gmail.com
1042 NM			
Bar number & S	tato		

Deb	otor 1	Caryssa V. O'Lea	ry			
		First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	Jeremy J. O'Leary First Name	y Middle Name	Last Name		
		ankruptcy Court for the:	DISTRICT OF NEW M	IEXICO		
Oili	ieu States Di	ankruptcy Court for the.	DIGITAL OF INC.	LEXIOO		
	se number nown)				□ Chec	k if this is an
(_	ded filing
Se a	mmary of the second sec	and accurate as possib out all of your schedule	ole. If two married peoples first; then complete	and Certain Statistical Information le are filing together, both are equally responsible f the information on this form. If you are filing amend ck the box at the top of this page.	or supplyir	
Par	t 1: Sumr	marize Your Assets				
					Your a	ssets of what you own
1.	Schedule 1a. Copy li	A/B: Property (Official Fonds 15, Total real estate, from	orm 106A/B) rom Schedule A/B		\$	0.00
	1b. Copy li	ne 62, Total personal prop	perty, from Schedule A/B	8	\$	25,187.00
	1c. Copy lin	ne 63, Total of all property	y on Schedule A/B		\$	25,187.00
Par	t 2: Sumr	narize Your Liabilities				
						i abilities It you owe
2.		D: Creditors Who Have Cl ne total you listed in Colur		ty (Official Form 106D) tt the bottom of the last page of Part 1 of Schedule D	\$	21,500.00
3.		E/F: Creditors Who Have the total claims from Part		ial Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy t	the total claims from Part 2	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	92,305.00
				Your total liabilities	\$	113,805.00
	t 3: Sumr	narize Your Income and	l Expenses			
Par		: Your Income (Official Fo		le I	\$	3,200.00
		combined monthly income			œ.	3,800.00
4.	Copy your Schedule	J: Your Expenses (Official			a	
4. 5.	Copy your Schedule Copy your	J: Your Expenses (Official	ine 22c of Schedule J			·
4. 5.	Copy your Schedule Copy your t 4: Answ Are you fil	J: Your Expenses (Official monthly expenses from linger These Questions for ling for bankruptcy under	ine 22c of Schedule J Administrative and State of Chapters 7, 11, or 13	tistical Records	ur other sc	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Debtor 1	Caryssa V. O'Leary
Debtor 2	Jeremy J. O'Leary

Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,500.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

3.2	Model:	Dodge 1500 2003 e mileage: 150K	At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	\$15,200.00 Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the entire property? \$7,000.00	d claims on Schedule D:
	Make: Model: Year: 2	Dodge 1500 2003 e mileage: 150K	Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Claim	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the
	Make: Model: Year: 2	Dodge 1500 2003	Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Claim	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the
	Make: Model:	Dodge 1500	■ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only	Do not deduct secured clithe amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property.
	Make:	Dodge	Check if this is community property (see instructions) Who has an interest in the property? Check one	Do not deduct secured cluthe amount of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i>
	Other inforn	iduoti.	■ Check if this is community property	\$15,200.00	\$15,200.00
0.1	Other inforn	iduoti.	☐ At least one of the debtors and another	445 000 00	445.000.00
0.1		nation:			
0.1	Approximate	e mileage: 150K	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
0.1	_	2008	Debtor 1 only Debtor 2 only		, , ,
3.1		nfiniti G37-V6	Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
■,	Yes				
	No				
		ucks, tractors, sport utility ve	•	mexpired Leases.	
			interest in any vehicles, whether they are register report it on Schedule G: Executory Contracts and U		ehicles you own that
Part 2	Describe	Your Vehicles			
_	No. Go to Par Yes. Where is	t 2. the property?			
_	•	, , ,	st in any residence, building, land, or similar property?		
			or Other Real Estate You Own or Have an Interest In		
	r every ques		Show to this form on the top of any additional pay	ee, mine your name and cast	(II MIOWII).
think i	t fits best. B	e as complete and accurate as p	List an asset only once. If an asset fits in more than o ossible. If two married people are filing together, both a rate sheet to this form. On the top of any additional pag	re equally responsible for su	pplying correct
_		e A/B: Propert	y		12/15
Offi	cial Fo	rm 106A/B			
Case	number _				Check if this is an amended filing
_		nkruptcy Court for the: DIST	RICT OF NEW MEXICO		_
Unite	e, if filing)	First Name	Middle Name Last Name		
	or 2	First Name Jeremy J. O'Leary	Middle Name Last Name		
	or 1	Caryssa V. O'Leary			

Debtor 1 Debtor 2	Caryssa V. O		
		the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here=>	\$22,200.00
Part 3: Do	escribe Your Perso	nal and Household Items	
		egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examp □ No	nold goods and f les: Major applian . Describe	urnishings ces, furniture, linens, china, kitchenware	dams of exemptions.
		household goods, furniture, appliances	\$500.00
□ No	les: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music phones, cameras, media players, games	collections; electronic devices
		tvs, radios, cell phones, computer & accessories	\$1,000.00
Examp No Yes Property of the second of the	other collection Describe nent for sports a	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	
		miscl sport equip	\$100.00
■ No □ Yes 11. Clothe Exam □ No	ples: Pistols, rifles Describe	s, shotguns, ammunition, and related equipment others, furs, leather coats, designer wear, shoes, accessories	
		shoes, boots, clothing, wearing apparel	\$500.00
□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
		miscl jawalry	\$200.00

		Caryssa V. O'Leary Jeremy J. O'Leary	Case number (if known)	
40	-	•		
13.		m animals les: Dogs, cats, birds, horses		
		Describe		
14.	Any othe	er personal and household items you did not already list,	including any health aids you did not list	
		Give specific information	_	
15		ne dollar value of all of your entries from Part 3, including a rt 3. Write that number here		\$2,300.00
Pa	rt 4: Desc	cribe Your Financial Assets		
D	you owr	n or have any legal or equitable interest in any of the follow	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	es: Money you have in your wallet, in your home, in a safe dep		
	☐ Yes			
17.	Example	s of money les: Checking, savings, or other financial accounts; certificates institutions. If you have multiple accounts with the same in:		uses, and other similar
	□ No ■ Yes	Institution	name:	
		Bank of	the West; Rio Grande CU; NM Bank &	
		17.1. checking & savings Trust		\$500.00
18.		mutual funds, or publicly traded stocks les: Bond funds, investment accounts with brokerage firms, mo Institution or issuer name:	ney market accounts	
19.	Non-pub	blicly traded stock and interests in incorporated and uninc	corporated businesses, including an interest in	n an LLC, partnership, and
	joint ve ■ No	nture		
	☐ Yes. 0	Give specific information about them Name of entity:	% of ownership:	
20.	Negotia Non-neg	ment and corporate bonds and other negotiable and non-numble instruments include personal checks, cashiers' checks, progotiable instruments are those you cannot transfer to someone	omissory notes, and money orders.	
	■ No	Sive specific information about them		
	□ 1es. 0	Issuer name:		
21.		ent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift saving	gs accounts, or other pension or profit-sharing pla	ins
		ist each account separately. Type of account: Institution	name:	
22.	Your sha	deposits and prepayments are of all unused deposits you have made so that you may cor		
	Example ■ No	es: Agreements with landiords, prepaid rent, public utilities (ele	ectric, gas, water), telecommunications companies	s, or others

Debtor 1 Debtor 2	Caryssa V. O'Leary Jeremy J. O'Leary		Case	number (if known)	
23. Annui t ■ No	ties (A contract for a periodic payr	nent of money to you, either for life of	or for a number of years	s)	
☐ Yes.	lssuer name and d	escription.			
	.C. §§ 530(b)(1), 529A(b), and 529	count in a qualified ABLE program (b)(1). Indicate the description of			m.
		property (other than anything list	ed in line 1) and righ	ts or nowers exercis	sable for your benefit
■ No	Give specific information about the	, , , ,	isa in ilile 1), ana ngi	is of powers exercis	sable for your benefit
Exam _i ■ No		e secrets, and other intellectual pr sites, proceeds from royalties and lid			
	ses, franchises, and other gener ples: Building permits, exclusive lie	al intangibles censes, cooperative association hold	dings, liquor licenses, p	rofessional licenses	
☐ Yes.	Give specific information about the	nem			
Money or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No ■ Yes.	Give specific information about th	em, including whether you already f	iled the returns and the	tax years	
		2017 tax refund		State of NM	\$187.00
■ No □ Yes.	ples: Past due or lump sum alimor Give specific information	ny, spousal support, child support, m	aintenance, divorce se	ttlement, property sett	tlement
	amounts someone owes you ples: Unpaid wages, disability insu- benefits; unpaid loans you m	rance payments, disability benefits, ade to someone else	sick pay, vacation pay,	workers' compensat	ion, Social Security
☐ Yes.	Give specific information				
Exam _l	sts in insurance policies ples: Health, disability, or life insur	ance; health savings account (HSA)	; credit, homeowner's,	or renter's insurance	
■ No □ Yes.	Name the insurance company of Company r		Beneficiary:		Surrender or refund value:
If you	terest in property that is due yo are the beneficiary of a living trust one has died.	u from someone who has died , expect proceeds from a life insurar	nce policy, or are currer	ntly entitled to receive	property because
	Give specific information				

	otor 1 otor 2	Caryssa V Jeremy J.					Case number (if known)	
				ther or not you have disputes, insurance of			and for payment	
	☐ Yes.	Describe eac	ch claim					
	Other c	ontingent ar	nd unliquidate	d claims of every na	ature, including	counterclaims o	of the debtor and rights to	set off claims
	☐ Yes.	Describe eac	ch claim					
35.	Any fin	ancial assets	s you did not a	Iready list				
	■ No □ Yes.	Give specific	information					
36.				r entries from Part			es you have attached	\$687.00
Part	5: Des	scribe Any Bus	siness-Related F	roperty You Own or H	ave an Interest In	n. List any real esta	ate in Part 1.	
37. [Oo you o	wn or have an	ny legal or equita	ıble interest in any bus	siness-related pro	operty?		
	No. Go	to Part 6.						
	Yes. G	o to line 38.						
Part				cial Fishing-Related Promised Related Promised Inc.	roperty You Own	or Have an Interes	st In.	
46.	Do you	own or have	e any legal or e	equitable interest in	any farm- or co	ommercial fishin	g-related property?	
	No.	Go to Part 7.						
	☐ Yes.	Go to line 47.						
Part	7:	Describe All	Property You O	wn or Have an Interest	in That You Did	Not List Above		
_	Examp			y kind you did not a club membership	Iready list?			
	■ No	Give specific	information					
-	⊒ 1es. (Sive specific	IIII0IIIIali0II					
54.	Add tl	he dollar val	ue of all of you	r entries from Part	7. Write that nu	ımber here		\$0.00
Part	8:	List the Totals	s of Each Part of	this Form				
55.	Part 1	: Total real e	estate, line 2					\$0.00
56.	Part 2	: Total vehic	les, line 5			\$22,200.00		
57.	Part 3	: Total perso	onal and house	ehold items, line 15		\$2,300.00		
58.	Part 4	: Total finan	cial assets, lin	e 36		\$687.00		
59.			-	operty, line 45		\$0.00		
60.			_	elated property, line	52	\$0.00		
61.	Part 7	: Total other	property not	isted, line 54	+	\$0.00		
62.	Total	personal pro	perty. Add line	es 56 through 61		\$25,187.00	Copy personal property t	otal \$25,187.00
63.	Total	of all proper	ty on Schedul	A/B . Add line 55 + I	line 62			\$25,187.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Caryssa V. O'Lea	ry Middle Name	Last Name	_
Debtor 2	Jeremy J. O'Leary		Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW MEXICO		_
Case number (if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	y the F	roperty	You (Claim	as Exe	empt
---------	----------	---------	---------	-------	-------	--------	------

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.						
	2008 Infiniti G37-V6 150K miles Line from Schedule A/B: 3.1	\$15,200.00		\$200.00	11 U.S.C. § 522(d)(2)					
	Line from Scriedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit						
	2003 Dodge 1500 150K miles Line from Schedule A/B: 3.2	\$7,000.00		\$500.00	11 U.S.C. § 522(d)(2)					
	Line nom Schedule AVB. 3.2			100% of fair market value, up to any applicable statutory limit						
	household goods, furniture, appliances	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)					
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						
	tvs, radios, cell phones, computer & accessories	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)					
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit						
	miscl sport equip Line from Schedule A/B: 9.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)					
	Line from <i>Schedule XVD</i> . 9.1			100% of fair market value, up to any applicable statutory limit						

Caryssa V. O'Leary Debtor 1 Jeremy J. O'Leary Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B shoes, boots, clothing, wearing 11 U.S.C. § 522(d)(3) \$500.00 \$500.00 apparel Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit miscl jewelry 11 U.S.C. § 522(d)(4) \$200.00 \$200.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit checking & savings: Bank of the 11 U.S.C. § 522(d)(5) \$500.00 \$500.00 West; Rio Grande CU; NM Bank & **Trust** 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit State of NM: 2017 tax refund 11 U.S.C. § 522(d)(5) \$187.00 \$187.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this informati	ion to identify you	r case:				
	Caryssa V. O'Le					
	First Name Jeremy J. O'Lea	Middle Name Last Name				
	First Name	Middle Name Last Name				
United States Bankro	uptcy Court for the:	DISTRICT OF NEW MEXICO				
Case number				☐ Check	if this is an	
				_	led filing	
Official Form 1	IOSD					
Official Form 1		Who House Claims Consum	ad by Dranauty		4045	
Schedule D	: Creditors	Who Have Claims Secure	ed by Property	<u>/</u>	12/15	
		f two married people are filing together, both are out, number the entries, and attach it to this form.				
1. Do any creditors hav	ve claims secured by	your property?				
□ No. Check thi	is box and submit th	nis form to the court with your other schedules.	You have nothing else to	report on this form.		
Yes. Fill in all	of the information b	pelow.				
Part 1: List All S	ecured Claims					
		nore than one secured claim, list the creditor separate		Column B	Column C	
		a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion	
2.1 Rio Grande (Credit Union	Describe the property that secures the claim:	value of collateral. \$15,000.00	s15,200.00	If any \$0.00	
Creditor's Name	Credit Officia	2008 Infiniti G37-V6 150K miles	φ13,000.00	\$13,200.00	φυ.υυ	
C/O Aldridge	e, Hammar,					
Wexler & Bra	•	As of the date you file, the claim is: Check all that				
1212 Pennsy Albuquerque		apply. Contingent				
Number, Street, City		☐ Unliquidated				
	,	☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage or s	secured			
Debtor 2 only		car loan) Statutory lien (such as tax lien, mechanic's lien)				
■ Debtor 1 and Debto At least one of the description	•	☐ Judgment lien from a lawsuit				
Check if this claim		☐ Other (including a right to offset)				
community debt	relates to a					
Date debt was incurre	ed 11/14	Last 4 digits of account number xx76	;			
		<u> </u>	<u></u>			
2.2 Sandia Area	F.C.U.	Describe the property that secures the claim:	\$6,500.00	\$7,000.00	\$0.00	
Creditor's Name		2003 Dodge 1500 150K miles				
POB 18044						
Albuquerque	e, NM	As of the date you file, the claim is: Check all that apply.				
87185-0044	•	□ Contingent				
Number, Street, City	y, State & Zip Code	Unliquidated				
Who owes the debt?	Charle and	Disputed Nature of lien. Check all that apply.				
Debtor 1 only	Check one.					
Debtor 2 only		An agreement you made (such as mortgage or s car loan)	securea			
■ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the d	-	☐ Judgment lien from a lawsuit				
Check if this claim community debt	relates to a	Other (including a right to offset)				
Date debt was incurre	od 3/16	Last 4 digits of account number xx81	Ī			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1	Caryssa V. O'Leary			Case number (if know)	
	First Name	Middle Name	Last Name		
Debtor 2	Jeremy J. O'L	_eary			
	First Name	Middle Name	Last Name		
Add the	dollar value of you	ır entries in Column A on t	this page. Write that number here:	\$21,500.00	
If this is	the last page of yo	our form, add the dollar va	lue totals from all pages.	\$21 500 00	

\$21,500.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in t	his informat	on to identify your ca	ise:					
Debtor	1	Caryssa V. O'Leary	•					
		First Name	Middle Nar	ne	Last Name	_		
Debtor	_	Jeremy J. O'Leary						
(Spouse if	f, filing)	First Name	Middle Nar	ne	Last Name			
United 9	States Bankr	uptcy Court for the:	DISTRICT O	F NEW MEXICO				
Case ni	umber							
(if known)								Check if this is an
								amended filing
Officia	al Form 1	06E/E						
		: Creditors Wh	o Hava I	Incocurad	Claims			12/15
						Part 2 for creditors with NON	DDIODITY	
Schedule left. Attac	e D: Creditors ch the Continu d case numbe	Who Have Claims Secur lation Page to this page.	ed by Property If you have no	y. If more space is ro information to rep	needed, copy 1	any creditors with partially s the Part you need, fill it out, r do not file that Part. On the to	number the	entries in the boxes on the
1. Do a	any creditors I	nave priority unsecured	claims against	you?				
	No. Go to Part	2.						
	Yes.							
Part 2:	List All of	Your NONPRIORITY	Unsecured (Claims				
3. Do a	any creditors I	nave nonpriority unsecu	red claims aga	inst you?				
	No. You have n	othing to report in this par	t. Submit this fo	rm to the court with	your other sche	edules.		
	Yes.							
unse	ecured claim, li	st the creditor separately for	or each claim. F	For each claim listed	, identify what t	o holds each claim. If a credito type of claim it is. Do not list cla three nonpriority unsecured cl	ims already	included in Part 1. If more
								Total claim
4.1	Account S	ervice Dept.	ı	ast 4 digits of acc	ount number	xx33		\$1,800.00
	Nonpriority Cr	editor's Name						
	POB 731 Mahwah, N	1107420	'	When was the debt	incurred?	7/16		<u></u>
-		t City State Zlp Code		As of the date you f	file, the claim i	is: Check all that apply		
	Who incurred	the debt? Check one.		j	•			
	Debtor 1 o	nly		☐ Contingent				
	Debtor 2 o	nly		☐ Unliquidated				
	Debtor 1 a	nd Debtor 2 only		☐ Disputed				
	☐ At least on	e of the debtors and anoth		□ Disputed Гуре of NONPRIOR	ITY unsecured	d claim:		
	Chock if the	nis claim is for a commu		☐ Student loans				
	debt	no cianni io ioi a comillit	· ·	Obligations arisin	ng out of a sepa	ration agreement or divorce th	at you did no	t
	Is the claim s	ubject to offset?		eport as priority clair		3	,	
	■ No			•	•	g plans, and other similar debt	S	
	☐ Yes		İ	Other. Specify	consumer	goods		

	or 1 Caryssa V. O'Leary Dr 2 Jeremy J. O'Leary		Case number (if know)	
4.2	Agency Manager	Last 4 digits of account number	xx33	\$450.00
	Nonpriority Creditor's Name 3131 S. Vaughn Way STE 426 Aurora, CO 80014	When was the debt incurred?	6/16	<u> </u>
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent		
	<u> </u>	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify consumer	goods	
4.3	AlignMD of NM PLLC	Last 4 digits of account number	xx58	\$460.00
	Nonpriority Creditor's Name POB 4458 Dept. 159	When was the debt incurred?	12/17	
	Houston, TX 77210-4458			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical se	rvices	
4.4	Allied Interstate LLC	Last 4 digits of account number	xx01	\$7,300.00
	Nonpriority Creditor's Name POB 361445	When was the debt incurred?	9/13	
	Columbus, OH 43236 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify consumer	goods	

	Caryssa V. O'Leary Jeremy J. O'Leary		Case number (if know)							
4.5	American Express Nonpriority Creditor's Name	Last 4 digits of account number	xx06	\$5,900.00						
	POB 981537 El Paso, TX 79998	When was the debt incurred?	6/16							
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply							
	☐ Debtor 1 only	☐ Contingent								
	☐ Debtor 2 only	☐ Unliquidated	-							
	■ Debtor 1 and Debtor 2 only	☐ Disputed								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:							
	■ Check if this claim is for a community	☐ Student loans								
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not							
	No	Debts to pension or profit-sharing	g plans, and other similar debts							
	Yes	Other. Specify consumer	goods							
4.6	Ammre Property Mgt. Nonpriority Creditor's Name	Last 4 digits of account number	xx33	\$3,000.00						
	2329 Wisconsin NE Albuquerque, NM 87110	When was the debt incurred?	1/17							
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply							
	Who incurred the debt? Check one.									
	☐ Debtor 1 only	☐ Contingent								
	☐ Debtor 2 only	☐ Unliquidated								
	■ Debtor 1 and Debtor 2 only	Disputed								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure								
	■ Check if this claim is for a community	☐ Student loans								
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims								
	No	Debts to pension or profit-sharing								
	Yes	Other. Specify consumer								
4.7	Barclay	Last 4 digits of account number	xx71	\$4,000.00						
	Nonpriority Creditor's Name POB 8803 Wilmington, DE 19899	When was the debt incurred?	11/13							
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim								
	Debtor 1 only	☐ Contingent								
	☐ Debtor 2 only	☐ Unliquidated								
	■ Debtor 1 and Debtor 2 only	_ '								
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:							
	Check if this claim is for a community	Student loans								
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims								
	■ No		Debts to pension or profit-sharing plans, and other similar debts							
	☐ Yes	Other. Specify comsumer								
		- Other. Opedity								

	r 1 Caryssa V. O'Leary r 2 Jeremy J. O'Leary		Case number (if know)	
4.8	Capital One Bank (USA) NA	Last 4 digits of account number	xx58	\$40.00
	Nonpriority Creditor's Name POB 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	5/13	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	_	☐ Student loans	- Julii	
	Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	g plans, and other similar debts	
	☐ Yes	, ,		
	⊔ Yes	Other. Specify consumer	goods	
4.9	Central Credit Services LLC Nonpriority Creditor's Name	Last 4 digits of account number	xx04	\$3,500.00
	500 North Franklin	When was the debt incurred?	4/16	
	Turnpike STE 200			
	Ramsey, NJ 07446			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only			
	Debtor 2 only	☐ Contingent		
	<u> </u>	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharir		
	Yes	Other. Specify consumer	goods	
4.1	Chase Cards	Last 4 digits of account number	xx33	\$3,000.00
	Nonpriority Creditor's Name	_		
	270 Park Ave.	When was the debt incurred?	6/16	
	New York, NY 10017 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam	S. Check all that apply	
	☐ Debtor 1 only	П.,		
	Debtor 2 only	Contingent		
	_	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe proof as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
		· · ·		
	Yes	Other. Specify consumer	goods (Amazon)	

Citi Cards	Last 4 digits of account number xx89	\$1,960.00
Nonpriority Creditor's Name POB 6403	When was the debt incurred? 9/16	
Sioux Falls, SD 57117-6403 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent	
Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
At least one of the debtors and another Check if this claim is for a community	Type of NONPRIORITY unsecured claim: Student loans	
lebt s the claim subject to offset? —	Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify consumer goods	
Collections Systems Nonpriority Creditor's Name	Last 4 digits of account number xx60	\$1,725.00
POB 1020 Pept. 806	When was the debt incurred? 10/14	
Iorsham, PA 19044 umber Street City State Zlp Code //no incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
Debtor 2 only	☐ Contingent	
Debtor 1 and Debtor 2 only	Unliquidated	
<u> </u>	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community lebt sthe claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not
No	□ Debts to pension or profit-sharing plans, and other similar debts	
■ No ☑ Yes	Other. Specify consumer goods	
Comenity Bank Nonpriority Creditor's Name	Last 4 digits of account number XX20	\$1,100.00
POB 659728 San Antonio, TX 78265-9728	When was the debt incurred? 5/14	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	. ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
Check if this claim is for a community lebt sthe claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
⊒ Yes	■ Other Specify consumer goods (Zales)	

Credit Protection Associates LP	Last 4 disits of account country	xx22	\$40.0
Nonpriority Creditor's Name	Last 4 digits of account number		φ40.0
13355 Noel Rd. STE 2100 Dallas, TX 75240	When was the debt incurred?	11/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify consumer	goods	
Discover Fincl Svc LLC	Last 4 digits of account number	xx74;xx70	\$11,600.0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ11,0001
POB 15316	When was the debt incurred?	1/16	
Wilmington, DE 19850 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	, io o i iiio uuio you iiio, iiio oiuiiii	er chook an mat apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other Specify consumer	goods	
Freedom Road Financial	Last 4 digits of account number	vv31	\$2,000.0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ2,000.
POB 18218 Reno, NV 89511-0218	When was the debt incurred?	8/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	<u> </u>		
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	consumer	goods repo 2016 KLR 650 Motorcycle	

Lovelace Health Syst. Inc.	Last 4 digits of account number	xx58	\$500.0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ300.
POB 912681 Denver, CO 80291	When was the debt incurred?	12/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing		
Yes	Other. Specify _ medical serv	vices	
Nationwide Credit Inc.	Last 4 digits of account number	xx06	\$2,270
Nonpriority Creditor's Name POB 14581	When was the debt incurred?	6/16	
Des Moines, IA 50306		Charles II that are le	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Спеск ан тлат аррну	
Debtor 1 only	П.		
Debtor 2 only	☐ Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?		ation agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
□ Yes	Other. Specify consumer go		
NM Gas Company		xx97	\$40.
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ+υ.
POB 97500 Albuquerque, NM 87125	When was the debt incurred?	4/15	
Number Street City State Zlp Code	As of the date you file, the claim is	: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured of Student loans	claim:	
■ Check if this claim is for a community debt		ation agreement or diverse that you did not	
ls the claim subject to offset?	report as priority claims	ation agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	plans, and other similar debts	
□ Yes	Other. Specify consumer go	oods	

Northland Group	Last 4 digits of account number		\$1,000.0
Nonpriority Creditor's Name POB 390905	When was the debt incurred?	9/16	
Minneapolis, MN 55439 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify consumer	goods	
PayPal	Last 4 digits of account number	xx76	\$1,750.0
Nonpriority Creditor's Name POB 105658	When was the debt incurred?	9/16	,,
Atlanta, GA 30348-5658			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	_		
Debtor 2 only	☐ Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans	d Oldini.	
debt	_	aration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	·	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify consumer	goods	
Revenue Enterprises LLC	Last 4 digits of account number	xx22	\$420.0
Nonpriority Creditor's Name POB 441368	When was the debt incurred?	11/16	
Aurora, CO 80044 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community debt	Student loans		
dept Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
		goods	

Rio Grande Credit Union	Last 4 digits of account number	xx33;xx09	\$22,500.00
Nonpriority Creditor's Name C/O Aldridge, Hammar, Wexler & BradleyPA 1212 Pennsylvania NE Albuquerque, NM 87110	When was the debt incurred?	11/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify CD-202-CV-	goods, credit cards, repo 2018-01791)	
Sandia Heights Service	Last 4 digits of account number	xx10	\$220.00
Nonpriority Creditor's Name 10 Tramway Loop NE Albuquerque, NM 87122	When was the debt incurred?	10/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	_		
Debtor 2 only	☐ Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
_	Student loans	u ciann.	
■ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin		
Yes	Other. Specify consumer	goods	
SYNCB/fka GE Captial Retail Bank	Last 4 digits of account number	xx33;01;33;	\$13,000.00
Nonpriority Creditor's Name POB 965007	When was the debt incurred?	4/16	· ,
Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	consumer	goods (Paypal; Amazon; Sams Credit; Discount Tire)	

	Caryssa \ Jeremy J.	_		Case n	iumber (if know	v)	
	TD Bank US	_		vvQ1	;xx67		\$2.200.00
	Corp/Morefolity Cred POB 660170		Last 4 digits of account number When was the debt incurred?	12/16	<u>*</u>		\$2,300.00
	Dallas, TX 7	75266-0170	_		<u> </u>		
		City State Zlp Code	As of the date you file, the claim	is: Check	all that apply		
_		the debt? Check one.					
_	Debtor 1 onl	•	☐ Contingent				
_	Debtor 2 onl		☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
[At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	Check if thi	s claim is for a community	☐ Student loans				
	debt s the claim su	bject to offset?	Obligations arising out of a separeport as priority claims	aration ag	reement or div	orce that you did not	
	No		☐ Debts to pension or profit-sharing	g plans,	and other simila	ar debts	
			_ consumer	goods	(More for L	ess Furniture;	
	☐ Yes		Other. Specify Target)			<u> </u>	
4.2 7	Tricore Refe	erence Labs	Last 4 digits of account number	xx22			\$430.00
5		ditor's Name stead Rd. NE Bldg. 1B Ie, NM 87110	When was the debt incurred?	11/16	3		
		City State Zlp Code	As of the date you file, the claim	is: Check	all that apply		
V	Who incurred t	the debt? Check one.	•				
	Debtor 1 onl	ly	☐ Contingent				
	Debtor 2 onl	ly	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
Г	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
_	_	s claim is for a community	☐ Student loans				
d	debt	·	☐ Obligations arising out of a sepa	aration ag	reement or div	orce that you did not	
ls	s the claim su	bject to offset?	report as priority claims				
	No		Debts to pension or profit-sharing	ng plans,	and other simila	ar debts	
[☐ Yes		Other. Specify medical se	rvices			
Part 3:	List Others	s to Be Notified About a Deb	t That You Already Listed				
is trying have mo	g to collect fro ore than one c	m you for a debt you owe to sor	oout your bankruptcy, for a debt that y neone else, list the original creditor ir you listed in Parts 1 or 2, list the add submit this page.	Parts 1	or 2, then list	the collection agency here.	Similarly, if you
	d Address		On which entry in Part 1 or Part 2 did you		•		
	ande Credit Bravo SE	Union				Priority Unsecured Claims	
	erque, NM	87105	•	Part 2:	Creditors with N	Nonpriority Unsecured Claims	
			ast 4 digits of account number	X	k 01		
Part 4:	Add the Ar	mounts for Each Type of Un	secured Claim				
	ne amounts of unsecured cla		ns. This information is for statistical r	eporting	purposes onl	y. 28 U.S.C. §159. Add the a	mounts for each
						otal Claim	
τ.	6a.	Domestic support obligations		6a.	\$	0.00	
claii	otal ms						
from Par		Taxes and certain other debts	·	6b.	\$	0.00	
	6c.		njury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$	0.00	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Caryssa V. O'Leary

Debtor 2 Jeremy J. O'Leary Case number (if know) 6e. Total Priority. Add lines 6a through 6d. 6e. 0.00 Total Claim Student loans 6f. 0.00 Total claims from Part 2 Obligations arising out of a separation agreement or divorce that 0.00 you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts 6g. 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 92,305.00

Total Nonpriority. Add lines 6f through 6i.

6j.

Fill in this inform	mation to identify your	case:			
Debtor 1	Caryssa V. O'Lea	ry			
	First Name	Middle Name	Last Name		
Debtor 2	Jeremy J. O'Leary	у			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF NEW MEXICO			
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Ony		Olato	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	<u> </u>		<u> </u>		
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	- City		Ciaio	211 0000	
-	Name				_
	Number	Street			_
	City		State	ZIP Code	

Fill in this inf	ormation to identify your	case:			
Debtor 1	Caryssa V. O'Lea				
Debtor 2	First Name Jeremy J. O'Lear	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	DISTRICT OF NEW MEXIC	o		
Case number					
(if known)					Check if this is an amended filing
					amended ming
	form 106H				
Schedu	le H: Your Cod	ebtors			12/15
1. Do you No Yes 2. Within Arizona, C No. Go Yes. D	the last 8 years, have you California, Idaho, Louisiana, to line 3.	. Answer every question. you are filing a joint case, do r	erty state or territory? Rico, Texas, Washing	(Community property states a	
	In which community state Jeremy & Caryssa O 9 Unger Rd Cedar Crest, NM 870 Name of your spouse, former spo	08	New Mexico	Fill in the name and curren	t address of that person.
0 10 0 1000	Number, Street, City, State & Zip	Code			
in line 2 a	ngain as a codebtor only i iD), Schedule E/F (Official	f that person is a guarantor	or cosigner. Make su	your spouse is filing with youre you have listed the credite. 3). Use Schedule D, Schedule.	or on Schedule D (Official
	umn 1: Your codebtor e, Number, Street, City, State and Zl	P Code		Column 2: The creditor to Check all schedules that ap	
3.1				☐ Schedule D, line	
Nam	ne		 -	☐ Schedule E/F, line	
				☐ Schedule G, line	
Num	ber Street	Chata	ZID Code		
City		State	ZIP Code		
3.2				□ Cahadula D. lina	
Nam	ne			☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
Num	ber Street				
City		State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1
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								•				
	in this information to identify	your ca	se:									
Del	btor 1 Carys	sa V. C)'Leary									
	btor 2 Jerem	y J. O'	Leary									
Uni	ited States Bankruptcy Court	for the:	DISTRICT OF NEW M	1EXICO			_					
_	se number									d filing ent showi	ing postpetition cha	apter
O	fficial Form 106I										ioliowing date.	
	chedule I: Your	Inco	ome						MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate a plying correct information. use. If you are separated a ch a separate sheet to this Describe Employ	If you and your	are married and not filing wi	ng jointl th you,	y, and your : do not inclu	spouse de infor	is liv mati	ing wit	h you, inclu ut your spo	ude info	rmation about yo	ur eded,
1.	Fill in your employment information.			Debto	or 1				Debtor 2	or non-	filing spouse	
	If you have more than one		Employment status	■ En	■ Employed				■ Employed			
	attach a separate page wit information about additiona		Employment status	□ No	☐ Not employed				☐ Not employed			
	employers.		Occupation	Rece	Receptionist				self employed - internet jobs			
	Include part-time, seasona self-employed work.	l, or	Employer's name	ABQ	Dentists				9 Unge	r Rd		
	, ,		ent Employer's address		3900 Eubank NE STE 14co debtor works out of home doing on line work for goo & paid by 1099s Albuquerque, NM 87111			co debtor works out of home			be &	
			How long employed to	nere?	2yrs 4 ı	months	;		6	months	5	
Pai	rt 2: Give Details Abo	ut Mon	thly Income									
	mate monthly income as o		te you file this form. If	you have	e nothing to re	eport for	any	line, wr	te \$0 in the	space. Iı	nclude your non-fil	ing
f yo	ou or your non-filing spouse he space, attach a separate sl	ave mo		mbine t	he informatio	n for all	emple	oyers fo	or that perso	n on the	lines below. If you	need
1101	o opaco, anacii a sepaiale si	100110	ano ioiii.					For D	ebtor 1		ebtor 2 or iling spouse	
2.	List monthly gross wage deductions). If not paid mo					2.	\$		2,500.00	\$	1,000.00	
3.	Estimate and list monthly	v overti	me pay.			3.	+\$		0.00	+\$	0.00	

2,500.00

1,000.00

Calculate gross Income. Add line 2 + line 3.

Debtor 1 Caryssa V. O'Leary Jeremy J. O'Leary

Case number (if known)

				For	Debtor 1	_	or Debtor on-filing s		
	Сору	y line 4 here	4.	\$	2,500.00	\$		000.0	
5.	Liet	all payroll deductions:				•			
J.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	300.00	\$		0.0	0
	5a. 5b.	Mandatory contributions for retirement plans	5a. 5b.	\$ 	0.00	\$		0.0	
	5c.	Voluntary contributions for retirement plans	5c.	\$-	0.00	\$		0.0	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$		0.0	
	5e.	Insurance	5e.	\$_	0.00	\$		0.0	
	5f.	Domestic support obligations	5f.	\$	0.00	\$		0.0	
	5g.	Union dues	5g.	\$_	0.00	\$		0.0	
	5h.	Other deductions. Specify:	_ 5h.+	+ \$_	0.00	+ \$		0.0	0
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	300.00	\$		0.0	0_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,200.00	\$	1,	0.00	0_
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8a. 8b. 8c. 8d. 8e.	\$ \$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$		0.0 0.0 0.0 0.0 0.0	0 0 0 0
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$			00
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,200.00 + \$_	1	,000.00	= \$	3,200.00
11.	Includ other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your of friends or relatives. of include any amounts already included in lines 2-10 or amounts that are not a lify:	depen				Schedule	e J. +\$ _	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines						\$	3,200.00
12	Do v	ou expect an increase or decrease within the year after you file this form?	,				,	Comb	oined hly income
13.	■	No.							
		Yes. Explain:							

Fill	in this informa	ation to identify yo	our case:					
Deb		Caryssa V. C				Che	ck if this is:	
		Caryssa v. C	Leary				An amended filing	
	tor 2 buse, if filing)	Jeremy J. O	Leary				A supplement show 13 expenses as of	ving postpetition chapter the following date:
``			· DISTRI	CT OF NEW MEXICO		-	MM / DD / YYYY	
Unit	ed States Banki	ruptcy Court for the	. DISTRI	CT OF NEW WIEXICO			IVIIVI / DD / TTTT	
1	e number nown)							
		orm 106J						
		J: Your			a filing together b	-th are are:	ally recognished fo	12/15
info	rmation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Par		ribe Your House	ehold					
1.	Is this a joir ☐ No. Go to							
	_	es Debtor 2 live	in a separ	ate household?				
	■ N							
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	tor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								□ Yes
3.		penses include of people other t	han	No				
		d your depende		Yes				
Par		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of suclificial Form 10		a nave inc	cluded it on <i>Schedule I:</i> Y	our income		Your exp	enses
4.	The rental of	or home owners	hip expen	ses for your residence. I	nclude first mortgage	e ,		222.22
	payments ar	nd any rent for th	e ground o	r lot.		4. \$	·	900.00
	If not include	ded in line 4:						
		estate taxes				4a. \$		0.00
		erty, homeowner's e maintenance, re		's insurance ıpkeep expenses		4b. § 4c. §		0.00
		owner's associate				4d. \$	3	0.00
5.	Additional r	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$	S	0.00

Schedule J: Your Expenses

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	otor 1		Caryssa V. O'Leary				
Deb	otor 2	Jeremy	J. O'Leary	Case num	ber	(if known)	
6.	Utilit	ies:					
	6a.	Electricity	y, heat, natural gas	6a.	\$		250.00
	6b.	Water, se	ewer, garbage collection	6b.	\$		0.00
	6c.	Telephon	ne, cell phone, Internet, satellite, and cable services	6c.	\$		200.00
	6d.	Other. Sp	pecify:	6d.	\$		0.00
7.	Food	and hous	sekeeping supplies		\$		600.00
8.	Child	dcare and	children's education costs	8.	\$		0.00
9.	Cloth	hing, laund	dry, and dry cleaning	9.	\$		125.00
10.	Pers	onal care	products and services	10.	\$		125.00
11.	Medi	ical and de	ental expenses	11.	\$		100.00
12.	Trans	sportation	n. Include gas, maintenance, bus or train fare.				
			car payments.	12.			600.00
			, clubs, recreation, newspapers, magazines, and books	13.	\$		150.00
14.	Char	ritable con	tributions and religious donations	14.	\$		50.00
15.		rance.					
			insurance deducted from your pay or included in lines 4 or 20.	45-	Φ		0.00
		Life insur		15a.			0.00
		Health in		15b.			0.00
		Vehicle ir		15c.			200.00
4.0			surance. Specify:	15d.	\$		0.00
16.	Spec		include taxes deducted from your pay or included in lines 4 or 2	0. 16.	\$		0.00
17.			lease payments:				
			nents for Vehicle 1	17a.			300.00
			nents for Vehicle 2	17b.	\$		200.00
		Other. Sp		17c.	\$		0.00
		Other. Sp		17d.	\$		0.00
18.			s of alimony, maintenance, and support that you did not re		φ		0.00
40			your pay on line 5, Schedule I, Your Income (Official Form	106I). 18.			
19.			ts you make to support others who do not live with you.	40	\$		0.00
20	Spec	,	perty expenses not included in lines 4 or 5 of this form or o	19.	~	Incomo	
20.			es on other property	20a.		mcome.	0.00
		Real esta		20a. 20b.			0.00
			, homeowner's, or renter's insurance	20b. 20c.			
				20d. 20d.			0.00
			ance, repair, and upkeep expenses	20d. 20e.			0.00
04			ner's association or condominium dues				0.00
۷۱.	Otne	er: Specify:			+\$)	0.00
22.			monthly expenses				
	22a.	Add lines 4	4 through 21.			\$	3,800.00
	22b.	Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2		\$	
	22c.	Add line 22	2a and 22b. The result is your monthly expenses.			\$	3,800.00
23.		•	monthly net income.	00-	Φ		0.000.00
			e 12 (your combined monthly income) from Schedule I.	23a.			3,200.00
	23b.	Copy you	ur monthly expenses from line 22c above.	23b.	-\$		3,800.00
	230	Subtract	your monthly expenses from your monthly income.				
	250.		It is your monthly net income.	23c.	\$		-600.00
_	_						
24.			an increase or decrease in your expenses within the year				deerees k
			you expect to finish paying for your car loan within the year or do you exp e terms of your mortgage?	bect your mortgage	payı	ment to increase or	uecrease pecause of a
	■ No		s tome of your mongago.				
			Evaluin horo:				
	☐ Ye	es.	Explain here:				

page 2

Fill in this infor	mation to identify your	case:				
Debtor 1	Caryssa V. O'Lea	ry				
	First Name	Middle Name	Last	Name		
Debtor 2	Jeremy J. O'Leary	y				
(Spouse if, filing)	First Name	Middle Name	Las	Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW MEX	KICO			
Case number						
(if known)						Check if this is an
						amended filing
Official Form Declarat		n Individual	Debte	or's Schedul	es	12/15
f two married n	eonle are filing together	r, both are equally respon	sible for s	unnlying correct informs	tion	
ii two married p	copic are ming together	, both are equally respon	isibic for s	applying correct informa	ition.	
obtaining mone		le bankruptcy schedules n connection with a bankr 519, and 3571.				
Sig	n Below					
Did you pa	y or agree to pay some	one who is NOT an attorn	ney to help	you fill out bankruptcy f	orms?	
■ No						
☐ Yes. I	Name of person				, ,	etition Preparer's Notice, nature (Official Form 119)
•	alty of perjury, I declare te true and correct.	that I have read the sumn	nary and s	chedules filed with this c	declaration and	
X /s/ Car	yssa V. O'Leary		х	/s/ Jeremy J. O'Leary	,	
	sa V. O'Leary		_ ~	Jeremy J. O'Leary		
	re of Debtor 1			Signature of Debtor 2		
Date	March 31, 2018			Date March 31, 2018	3	
_					-	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

		nation to identify you						
De	ebtor 1	Caryssa V. O'Le	Middle Name	La	st Name			
De	ebtor 2	Jeremy J. O'Lea	ry					
(Sp	pouse if, filing)	First Name	Middle Name	La	st Name			
Uı	nited States Ba	nkruptcy Court for the:	DISTRICT OF NEW MEX	ICO				
Ca	ase number							
1 - 1	known)						☐ Che	ck if this is an
							ame	ended filing
\sim	«: -: - I = -	407						
_	fficial Fo		A (() ()			.		
			Affairs for Individ					4/10
			ble. If two married people a					
		n). Answer every que	attach a separate sheet to stion.	tnis torm	On the top of al	ny additional pages, v	vrite your r	name and case
Đ:	art 1: Give D	Details About Your Ma	arital Status and Where You	ı Lived Re	fore			
				LIVEU DE	1016			
1.	what is you	r current marital statu	IS?					
	Married							
	☐ Not mar	rried						
2.	During the la	ast 3 years, have you	lived anywhere other than	where yo	u live now?			
	□ No							
		st all of the places you l	ived in the last 3 years. Do no	ot include	where you live no	ow.		
	Debtor 1 Pr	ior Address:	Dates Debtor 1		Debtor 2 Prior A	Address:		Dates Debtor 2
		e De Rafael NE que, NM 87122	From-To: 11/1/16 to 11/	1/17	Same as Debtor	r 1		Same as Debtor 1
	•	. ,						
		kadee Ln NE	From-To:		Same as Debtor	r 1		Same as Debtor 1
	Albuquero	que, NM 87122	11/1/14 to 11/	1/16			I	From-To:
3.	Within the Is	ast 8 years did you e	ver live with a spouse or leg	nal equiva	lent in a commu	unity property state or	territory?	(Community property
			lifornia, Idaho, Louisiana, Ne					
	□ No							
	Yes. Ma	ake sure you fill out Scl	hedule H: Your Codebtors (O	fficial Forr	า 106H).			
Pa	ert 2 Explai	in the Sources of You	r Income					
4.	Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a	all busines	ses, including pai	rt-time activities.	us calenda	ar years?
	ıt you are tilir	ng a joint case and you	have income that you receiv	e together	, IIST IT ONLY ONCE L	under Debtor 1.		
	□ No							
	Yes. Fill	I in the details.						
			Debtor 1			Debtor 2		
			Sources of income		income	Sources of income		Gross income
			Check all that apply.	(before	deductions and ons)	Check all that apply		(before deductions and exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

	Debtor 1		Debtor 2				
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
From January 1 of current year until the date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$10,500.00	■ Wages, commissions, bonuses, tips	\$3,000.00			
	☐ Operating a business		☐ Operating a business				
For last calendar year: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$26,448.00	■ Wages, commissions, bonuses, tips	\$4,256.00			
	☐ Operating a business		☐ Operating a business				
For the calendar year before that: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$11,804.00	☐ Wages, commissions, bonuses, tips	\$0.00			
	☐ Operating a business		☐ Operating a business				
and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambli winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.							
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)			
Part 3: List Certain Payments You	Made Before You Filed for E	3ankruptcy					
individual primarily for a puring the 90 days befor □ No. Go to line 7. □ Yes List below ear paid that creen to include power to adjustment of the state of the	ebtor 2 has primarily consu- personal, family, or household e you filed for bankruptcy, did ach creditor to whom you paid ditor. Do not include payment by by an attorney for the on 4/01/19 and every 3 years both have primarily consu- te you filed for bankruptcy, did ach creditor to whom you paid	d you pay any creditor a total d a total of \$6,425* or more into for domestic support obligations bankruptcy case.	of \$6,425* or more? none or more payments and ations, such as child support or after the date of adjustme of \$600 or more?	I the total amount you and alimony. Also, do nt.			
Creditor's Name and Address	Dates of payme	nt Total amount	Amount you Was this	s payment for			
		paid	still owe	, ,			

ebtor 2	Jeremy J. O'Leary		Cas	se number (if known)		
<i>Insid</i> of wh	in 1 year before you filed for bankrupto lers include your relatives; any general pa nich you are an officer, director, person in siness you operate as a sole proprietor. 1 ony.	artners; relatives of any ge control, or owner of 20%	neral partners; partners or more of their votin	erships of which yog g securities; and a	ou are a general iny managing ag	partner; corporation ent, including one fo
_	No Yes. List all payments to an insider.					
Insi	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
insid Inclu	de payments on debts guaranteed or cos		yments or transfer a	any property on a	ccount of a del	bt that benefited ar
	Yes. List all payments to an insider der's Name and Address	Dates of payment	Total amount	Amount you	Reason for t	his navment
IIISI	uel 3 Name and Address	Dates of payment	paid	still owe	Include credit	
Part 4:	Identify Legal Actions, Repossession	ns, and Foreclosures				
modi —	all such matters, including personal injury fications, and contract disputes. No Yes. Fill in the details.					·
	e title e number	Nature of the case	Court or agency		Status of the	case
Car	Grande Credit Union v. ryssa V. O'Leary 02-CV-2018-01791	collection	2nd J.D.C. Albuquerque,	NM 87102	■ Pending □ On appea □ Conclude	
Chec	in 1 year before you filed for bankruptock all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?
	Yes. Fill in the information below. ditor Name and Address	Describe the Property		Date		Value of the
Cie	uitor Name and Address			Date		property
	edom Road Financial	Explain what happene 2016 KLR 650 Kawa		12/1	7	\$2,000.00
	POB 18218 Reno, NV 89511-0218 ■ Property was repossessed. □ Property was foreclosed. □ Property was garnished.					
		☐ Property was attached	ed, seized or levied.			
acco	in 90 days before you filed for bankrup unts or refuse to make a payment bec No		cluding a bank or fi	nancial institution	າ, set off any ar	nounts from your
	Yes. Fill in the details.					
Cre	ditor Name and Address	Describe the action th	e creditor took	Date taker	action was n	Amoun

	btor 1 Caryssa V. O'Leary btor 2 Jeremy J. O'Leary		Case number	(if known)	
12.	Within 1 year before you filed for bankr court-appointed receiver, a custodian, o ■ No □ Yes		as any of your property in the possession of an er official?	assignee for the bene	efit of creditors, a
Par	rt 5: List Certain Gifts and Contributio	ns			
13.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$6 per person Person to Whom You Gave the Gift and Address:	600	lid you give any gifts with a total value of more to Describe the gifts	chan \$600 per person Dates you gave the gifts	? Value
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or		lid you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed	Dates you contributed	Value
Par	rt 6: List Certain Losses	,			
15.	Within 1 year before you filed for bankr or gambling? No Yes. Fill in the details.	uptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending ace claims on line 33 of Schedule A/B: Property.	Date of your Value of proloss	
Par	rt 7: List Certain Payments or Transfe	rs			
16.	consulted about seeking bankruptcy or	preparir	d you or anyone else acting on your behalf pay ng a bankruptcy petition? s, or credit counseling agencies for services require		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Erenio Gutierrez Jr., Attorney at La POB 35278 Albuquerque, NM 87176-5278 bankruptcyabq@gmail.com		Attorney Fees	3/29/18	\$1,000.00
	Access Credit Counseling Inc.		credit counseling certification	3/29/18	\$14.95
	www.accessbk.org				

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors. Do not include any payment or transfer that you have the property of the propert	or to make payments			or transfer any propert	ty to anyone who
	Yes. Fill in the details. Person Who Was Paid Address	Description and va	alue of any prop	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes, Fill in the details.	siness or financial affa le as security (such as the	irs? ne granting of a se		perty to anyone, other	
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			any property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.		/ property to a se	elf-settled tru	ust or similar device o	f which you are a
	Name of trust	Description and va	alue of the prope	erty transferr	ed	Date Transfer was made
Par	List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Stor	rage Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association of the second o	other financial accoun	ts; certificates o	of deposit; sh		
		Last 4 digits of account number	Type of accoun instrument	clc mc	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No	ear before you filed for	bankruptcy, any	safe deposi	t box or other deposit	ory for securities,
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)			Do you still have it?
22.	Have you stored property in a storage unit or ■ No □ Yes. Fill in the details.	place other than your	home within 1 y	ear before yo	ou filed for bankruptcy	1?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		contents	Do you still have it?		

Pa	rt 9: Identify Property You Hold or Control for	Someone Else									
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust							
	No										
	Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value							
Pa	rt 10: Give Details About Environmental Inform	ation									
For	the purpose of Part 10, the following definitions	apply:									
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.										
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.										
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,							
Rep	port all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.								
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e under or in violation of an environm	ental law?							
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice								
25.	Have you notified any governmental unit of any release of hazardous material?										
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice							
26.	Have you been a party in any judicial or admini	strative proceeding under any env	ironmental law? Include settlements	and orders.							
	■ No										
	Yes. Fill in the details.										
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case							
Pa	rt 11: Give Details About Your Business or Con	nnections to Any Business									
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the following connections to an	y business?							
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)										
	☐ A partner in a partnership										
	☐ An officer, director, or managing executive of a corporation										
	☐ An owner of at least 5% of the voting or equity securities of a corporation										

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	btor 1 Caryssa V. O'Leary btor 2 Jeremy J. O'Leary	Ca	se number (if known)
	■ No. None of the above applies. Go to P	Part 12.	
	☐ Yes. Check all that apply above and fill	in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	cy, did you give a financial statement to ar	nyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Pa	rt 12: Sign Below		
are with	ve read the answers on this <i>Statement of Fine</i> true and correct. I understand that making a form a bankruptcy case can result in fines up to \$1.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection irs, or both.
/s/	Caryssa V. O'Leary	/s/ Jeremy J. O'Leary	
	ryssa V. O'Leary anature of Debtor 1	Jeremy J. O'Leary Signature of Debtor 2	
Da	te March 31, 2018	Date March 31, 2018	
1	you attach additional pages to Your Statementon No Yes	nt of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
Did	you pay or agree to pay someone who is not	an attorney to help you fill out bankruptcy	y forms?
コヽ	res. Name of Person Attach the <i>Bankru</i> ր	otcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).

Fill in	n this infor	mation to identify your case:						rected	in this form and	in Form
Debt	tor 1	Caryssa V. O'Leary			122	2A-1Su	op:			
Debt (Spou	tor 2	Jeremy J. O'Leary				■ 1. Th	nere is no presi	umption	n of abuse	
Unite	ed States I	Bankruptcy Court for the: District of New Mex	tico		'	а	pplies will be m	nade ur	mine if a presum nder <i>Chapter 7 M</i>	
	e number				.		Calculation (Offi		,	
(if kno	own)								ot apply now bed e but it could app	
						☐ Che	eck if this is a	n ame	nded filing	
Off	icial F	orm 122A - 1								
Ch	apter	7 Statement of Your Cur	rent	Моі	nthly Inc	ome)			12/15
attach case i	n a separate number (if l ying militar	and accurate as possible. If two married people are sheet to this form. Include the line number to with known). If you believe that you are exempted from y service, complete and file Statement of Exempticulate Your Current Monthly Income	nich the	addition umption	nal information a of abuse becau	ipplies. se you d	On the top of ar do not have prin	ny addit narily co	ional pages, write onsumer debts or	your name and because of
1.	What is y	our marital and filing status? Check one onl	v.							
	-	arried. Fill out Column A, lines 2-11.	,							
		ed and your spouse is filing with you. Fill out	hoth (Columns	A and B lines	2-11				
		d and your spouse is NOT filing with you.								
	_	ng in the same household and are not legal		•	•	lumns A	and R lines 2	P-11		
	☐ Livi per	ng separately or are legally separated. Fill on alty of perjury that you and your spouse are leng apart for reasons that do not include evading	ut Colu gally s	ımn A, li eparated	nes 2-11; do no d under nonban	t fill out kruptcy	Column B. By	checki s or th		
10 the	01(10A). For e 6 months,	erage monthly income that you received from all sexample, if you are filing on September 15, the 6-month and divide the total lather same rental property, put the income from that property.	nth peri by 6. Fill	od would in the re	be March 1 throusult. Do not include	ugh Augu de any in	ust 31. If the amo	unt of year	our monthly income once. For example	e varied during e, if both
			. ,		, ,	Colum Debto	n A	Colui Debt		
2.		ss wages, salary, tips, bonuses, overtime, a ductions).	nd co	mmissio	ons (before all	\$	2,500.00	\$	1,000.00	
3.	Alimony	and maintenance payments. Do not include payments.	oaymeı	nts from	a spouse if	\$	0.00	\$	0.00	
4.	of you or from an u and room	nts from any source which are regularly pai your dependents, including child support. nmarried partner, members of your household, mates. Include regular contributions from a spo to not include payments you listed on line 3.	Include your c	e regulai lepende	contributions nts, parents,	\$	0.00	\$	0.00	
5.	Net incor	ne from operating a business, profession, o	r farm							
					tor 1					
		eipts (before all deductions)	\$_	0.00						
	•	and necessary operating expenses	-\$	0.00	Camulana	Φ.	0.00	œ.	0.00	
		nly income from a business, profession, or farm	າ\$	0.00	Copy here ->	\$	0.00	\$	0.00	
6.	Net incor	ne from rental and other real property		Doh	otor 1					
	0.0000	cipto (hoforo all de dirette e -	\$	0.00	NOI I					
		eipts (before all deductions)	•\$ -\$	0.00						
		and necessary operating expenses nly income from rental or other real property	-φ \$		Copy here ->	\$	0.00	\$	0.00	
1	. 101 11101111	.,onio nom romai or other real property	Ψ			*				

0.00

7. Interest, dividends, and royalties

0.00

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 o		
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:							
	For you S	5	0.00					
	For your spouse	S	0.00					
9.	Pension or retirement income. Do not include any and benefit under the Social Security Act.	mount received that	was a	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or payi manity, or internation a separate page an	ments onal or od put the	\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add li each column. Then add the total for Column A to the to		\$	2,500.00	+ \$ _	1,000.00	=[\$	3,500.00
	<u></u>						Total c	urrent monthly
Part	Determine Whether the Means Test Applies	to You						
12.	Calculate your current monthly income for the year	r. Follow these step	ıs:					
	12a. Copy your total current monthly income from line			Con	y line 11	here=>	\$	3,500.00
	12d. Copy your total ourient monthly moonie from mic	' '			<i>,</i>			3,300.00
	Multiply by 12 (the number of months in a year)						x 1	2
	12b. The result is your annual income for this part of the	ne form				12	b. \$	12,000.00
13.	Calculate the median family income that applies to	you. Follow these	steps:					
	Fill in the state in which you live.	NM						
	Fill in the number of people in your household.	2						
	, , ,							6 407 00
	Fill in the median family income for your state and size of household							
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. C Go to Part 3.	On the top of page 1	, check box	1, There is	no presun	nption of abu	se.	
	14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2.</i> Go to Part 3 and fill out Form 122A-2.							
Part	Sign Below							
By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.								
	X /s/ Caryssa V. O'Leary X /s/ Jeremy J. O'Leary							
	Caryssa V. O'Leary		Jeremy	J. O'Leary	y			
	Signature of Debtor 1	5.	•	e of Debtor 2	2			
	Date March 31, 2018 MM / DD / YYYY	Dat	e March 3					
	If you checked line 14a, do NOT fill out or file For	m 122A-2.	, 20					
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.						

Official Form 122A-1